

## DO/ EO WORKSHEET

Paralegal/National Stage Division

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Application filed by :  20 months  30 months

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## INTERNATIONAL APPLICATION PAPERS IN THE APPLICATION FILE :

- |                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> International Application (RECORD COPY)                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> PCT/IB/331                                                                                                                                                                                                                                                                                                                                                                          |
| <input type="checkbox"/> Article 19 Amendments                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Request form PCT/RO/101                                                                                                                                                                                                                                                                                                                                                             |
| <input checked="" type="checkbox"/> PCT/IPEA/409 IPER : <input type="checkbox"/> EP <input type="checkbox"/> JP <input type="checkbox"/> SE <input type="checkbox"/> AU<br><input type="checkbox"/> US <input type="checkbox"/> FR <input type="checkbox"/> CN <input type="checkbox"/> ES <input type="checkbox"/> RU <input type="checkbox"/> AT <input type="checkbox"/> KR <input type="checkbox"/> _____ | <input type="checkbox"/> PCT/ISA/210 - Search Report : <input type="checkbox"/> EP <input type="checkbox"/> JP <input type="checkbox"/> SE <input type="checkbox"/> AU<br><input type="checkbox"/> US <input type="checkbox"/> FR <input type="checkbox"/> CN <input type="checkbox"/> ES <input type="checkbox"/> RU <input type="checkbox"/> AT <input type="checkbox"/> KR <input type="checkbox"/> _____ |
| <input type="checkbox"/> Annexes to 409                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Search Report References                                                                                                                                                                                                                                                                                                                                                            |
| <input checked="" type="checkbox"/> Priority Document (s) No. /                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Other : _____                                                                                                                                                                                                                                                                                                                                                                       |

## RECEIPTS FROM THE APPLICANT (other than checked above) :

- |                                                                                                                                                                                                                                                                    |                                                                                                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Basic National Fee (or authorization to charge)                                                                                                                                                                                | <input type="checkbox"/> Preliminary Amendment(s) Filed on :<br>1. _____ 2. _____ 3. _____                                                   |
| <input checked="" type="checkbox"/> Description <input checked="" type="checkbox"/> Claims <input type="checkbox"/> Abstract                                                                                                                                       | <input checked="" type="checkbox"/> Information Disclosure Statement(s) Filed on :<br>1. _____ 2. _____ 3. _____                             |
| <input checked="" type="checkbox"/> Drawing Figure(s) - (# of drwgs. 7 )                                                                                                                                                                                           | <input checked="" type="checkbox"/> Assignment Document (forwarded to Assignment Branch)                                                     |
| <input type="checkbox"/> Translation of Article 19 Amendments<br><input type="checkbox"/> entered <input type="checkbox"/> not entered :<br><input type="checkbox"/> not a page for page substitution<br><input type="checkbox"/> replaced by Article 34 Amendment | <input type="checkbox"/> Assignee PG Publication Notice<br><input type="checkbox"/> Substitute Specification Filed on :<br>1. _____ 2. _____ |
| <input type="checkbox"/> Annexes to 409<br><input type="checkbox"/> entered <input type="checkbox"/> not entered :<br><input type="checkbox"/> not a page for page substitution<br><input type="checkbox"/> other : _____                                          | <input type="checkbox"/> Verified Small Status Statement<br><input checked="" type="checkbox"/> Oath/ Declaration (executed)                 |
| <input type="checkbox"/> Application Data Sheet                                                                                                                                                                                                                    | <input type="checkbox"/> DNA Diskette <input type="checkbox"/> Sequence Listing                                                              |
| <input type="checkbox"/> Power of Attorney/ Change of Address                                                                                                                                                                                                      | <input type="checkbox"/> Other : _____                                                                                                       |

NOTES :  I.A. used as Specification  Other :

35 U.S.C. 371 - Receipt of Request (PTO-1390)

28 Dec 04

Date Acceptable Oath/ Declaration Received.

22 Sep 05

Date of Completion of requirements under 35 U.S.C. 371

Date of Completion of ALL requirements (no EP requested)

Date of Completion of DO/ EO 903 - Notification of Acceptance

Date of Completion of DO/ EO 905 - Notification of Missing Requirements

Date of Completion of DO/ EO 909 - Notification of Abandonment

Date of Completion of DO/ EO 916 - Notification of Defective Response

Date of Completion of DO/ EO 922

Date of Completion of DO/ EO 923